

APPLICATION NO. _____ NONE	FILING DATE (DAY/MONTH/YEAR)	STATUS - PATENTED, PENDING, ABANDONED _____
----------------------------------	---------------------------------	--

The undersigned hereby authorizes the U.S. attorney or agent named herein to accept and follow instructions from Mount Sinai School of Medicine as to any action to be taken in the Patent and Trademark Office regarding this application without direct communication between the U.S. attorney or agent and the undersigned. In the event of a change in the person from whom instructions may be taken, the U.S. attorney or agent named herein will be so notified by the undersigned.

I hereby appoint as my attorneys or agents the registered persons identified under

Customer No. 23565

for the law firm of Klauber & Jackson, said attorneys or agents with full power of substitution and revocation to prosecute this application and transact all business in the Patent and Trademark Office connected therewith.

Please address all correspondence regarding this application to:

DAVID A. JACKSON, ESQ.
KLAUBER & JACKSON
411 HACKENSACK AVENUE
HACKENSACK, NEW JERSEY 07601

Direct all telephone calls to David A. Jackson at (201) 487-5800.

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further, that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

FULL NAME OF SOLE INVENTOR: MING-MING ZHOU

COUNTRY OF CITIZENSHIP: United States

FULL RESIDENCE ADDRESS: 35 Richmond Drive
Greenwich, CT 06870

FULL POST OFFICE ADDRESS: 35 Richmond Drive
Greenwich, CT 06870

SIGNATURE OF INVENTOR _____

DATE _____